



Clarks Neck Volunteer Fire Department

2250 GPM
21

Pre-Incident Plan Data Sheet

County: Pitt or Beaufort

Date of Inspection: 4-2-11 Committee Officer: Robbie Cox

Committee Members: Jason Lewis, Thomas Blad

Location Information

Street Address: 4050 Wharton Station Rd Nearest Cross Street: Highway 264 West

Facility / Business Name: Wharton Station Tire & Auto Care Coastal Carolina Coatings

Facility Phone Number: (252-940) 0662 1853

Business Owner: Kari Spain Phone Number: (252-814-1085) Mobile Number: (252-717-7123)

Operating Information and Access

Emergency contacts and titles with phone numbers:

Name: Kari Spain Title: owner Contact Number: 252-814-1085

Name: Jonathan Spain Title: owner Contact Number: 252-717-7123

* If more room is required for emergency contacts, please use the back of this form.

Operating hours: Open: 8:00 am Closed: 5:30 pm David Spain 252-717-0785 - For first contact

Primary access: Sat 8am 4:00pm

Rock Driveway off of Wharton Station Rd

Side 1 for plan purposes: _____

Key box: Yes ☒ No Key box location: _____

Exterior access concerns: Yes ☒ No Locations: _____

Obstructions to aerials: Yes ☒ No Locations: Maybe wet in grass areas

Exterior door concerns: Yes ☒ No Locations: _____

Interior roof access: Yes ☒ No Locations: _____

Occupancy

Overall occupancy: _____

High fire load: Yes ☒ No Locations: Tire storage inside & outside

Life safety concerns: Roof truss system, compressed gas inside

Evacuation assembly plan: Yes ☒ No Assembly point location: Back left corner fence



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Hazards

Trash and waste hazards: One dumpster located on left side of building, 55 gallon oil drum inside at back left corner.

Incinerator or compactor inside: Yes ☒ No Locations: _____

Incinerator or compactor chutes: Yes ☒ No Locations: _____

Chutes sprinkled: Yes ☒ No

Outside compactors or dumpsters: ☒ Yes No Locations: Dumpster outside left side of building

Compactors or dumpsters attached or exposed to the interior: Yes ☒ No

Hazardous Materials present: ☒ Yes No

Location of MSDS sheets: No will get one completed soon

Hazardous Material inventory attached: Yes ☒ No

Location for use in emergency: will be in front of fire

Materials reactive with air, water, or other materials present: Yes ☒ No

Type of materials: _____

Typical location: _____

Radioactive materials present: Yes ☒ No

Typical location: _____

Process hazards present: Yes ☒ No

Typical location: _____

Construction

Number of stories: 1 Number of basements / full or partial: 0

Length: 102' Width: 46' Height: 16' of each floor.

* If more room is required for clarification of each floor, please use the back of this form.

Penthouse: Yes No ☒ Occupancy: _____

Roof covering: Tile (clay, cement, slate, etc.): ☐; Wood Shingles (treated / untreated): ☐; Metal: ☒;
Composite Shingle (asphalt): ☐; Built Up: ☐; No Roof: ☐; other: _____

Roof construction: Truss Trusses: ☒ Yes No

Floor construction: Concret Trusses: Yes ☒ No



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Construction (continued)

Wall construction: 4x4 with 1x4 strips with metal siding & roof

Construction type: Fire Resistive: ☐ Unprotected Non-Combustible: ☐ Protected Ordinary: ☐ Protected Wood Frame: ☐
Heavy Timber: ☐ Protected Non-Combustible: ☐ Unprotected Ordinary: ☐ Unprotected Wood Frame: ☒

Combustible concealed spaces: ☐ Yes ☒ No Location: _____

Interior fire barriers and walls: ☐ Yes ☒ No Locations: _____

Wall penetrations: ☐ Yes ☒ No Locations: _____

Openings protected by: ☐ Doors ☐ Shutters ☐ Sprinklers ☒ No protection

Interior stairs: Number: 1 Location: _____

Obstruction to stairways: _____

Elevators: Number: 1 Location: _____

Area served – full or partial: _____

Fire service mode: ☐ Yes ☒ No Elevator key location: _____

Elevator controls location: _____

Unprotected vertical openings: ☐ Yes ☒ No Type and Locations: _____

Water Supply

Primary water supply: Fire Hydrant at corner of Hwy 268^E & Wharton Station Rd

Fire Hydrant at CNVFD Sub station

Test results: Location: _____ Date: _____

Static pressure: _____ Residual pressure: _____ Flow rate: _____

Alternate supplies:

Private supply: ☐ Yes ☒ No Type: ☐ Gravity tank; ☐ Other tank; ☐ Cistern; ☐ Reservoir; ☐ Process system;

☐ Other: _____

Fire Pump: ☐ Yes ☒ No Supplied by: ☐ Public supply; ☐ Private supply

Start-up: ☐ Automatic ☐ Manual Number of pumps: _____



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Water Supply (continued)

Location of pumps: _____

On-site hydrants: ___ Yes ☒ No

Supplied by: ☐ Public supply; ☐ Private supply

Size of outlets and threads: _____

Location of hydrants: _____

Hydrant Flow Rate(s):

Red (500gpm or less) ☐; Orange (500gpm to 1000gpm) ☐; Green (1000gpm to 1500gpm) ☐; Blue (1500gpm or greater) ☐

Which system supplies what protection systems: _____

Nearest large volume water supply (greater than 2000 GPM): _____

Needed fire flow calculations:

Largest single area: _____

Needed Fire Flow

Building or Area	Area Measurements			Hazard Factors: Low, Moderate, High Severe			Total Flow Needed
	Length	Width	Height	Fire Load Factor	Life Hazard Factor	Exposure Factor	



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Protection System

Fire alarm system: ☐ Yes ☒ No Locations: _____

Annunciator location: _____

Type of alarms: _____

Extent of coverage: _____

Monitored system: ☒ Yes ☐ No Burgular Alarm
Fire alarm company: ADT

Phone number: 1-800-238-2727

Phil Scarborough 252 707-0203

Detector type and power supply: Smoke: ☐; Heat: ☐; Battery: ☐; Hardwire w/ Battery Backup: ☐

Carbon Monoxide: ☐; Combination: ☐; Plug In: ☐; Plug In w/ Battery Backup: ☐

Sprinkler system: ☐ Yes ☒ No Location of the FDC: _____

Size of FDC threads: _____

Type of system: Wet Pipe: ☐; Dry Chemical System: ☐; Halogen System: ☐; Class K System: ☐;

Dry Pipe: ☐; Foam System: ☐; CO2 System: ☐; Standpipes: ☐

Extent of coverage – full or partial: _____

Areas protected (if partial): _____

Location of main valve: _____

Location of sectional valves: _____

System coverage plan at valves: ☐ Yes ☐ No

Standpipe and inside hoses: ☐ Yes ☒ No

Combined with sprinkler system: ☐ Yes ☒ No

FDC same as for sprinkler system: ☐ Yes ☒ No

Location of FDC: N/A

Size of FDC threads: N/A

Type of standpipes: N/A

Extent of coverage – full or partial: N/A

Outlet locations: N/A

Outlet size and type: N/A



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Protection System (continued)

Special protection systems: ___ Yes ☒ No

Type of systems: _____

Locations: _____

Extent of coverage – full or partial: _____

Utilities

Y/N	Service	Shutoff location
N	Natural Gas	
N	LP-Gas	
N	Fuel Oil	
Y	Electric	East Front
N	Emergency Power	
N	Heating	owner stated he was going to install a Heat & air unit in at a later time.
Y	Water	Pump House Left side of building
N	Hot Water	
N	Steam	
N	A/C and ventilation	
Y	Specialty gas*	Oxygen, Acetylene
Y	Specialty gas*	

* Record type of gas

Occupant concerns for utilities: ___ Yes ☒ No

Responsible contact: _____

Process concerns for utilities: ___ Yes ☒ No

Responsible contact: City of Washington

Comments: _____



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Exposures

Exposure Number	Separation (ft)	Life Hazard	Fire Load	Construction	Sprinkled	Priority (low = 5)

Other exposure concerns: _____

Special Resource Consideration: _____

Confined Spaces: ☐ Yes ☐ No Locations: _____

Remarks:

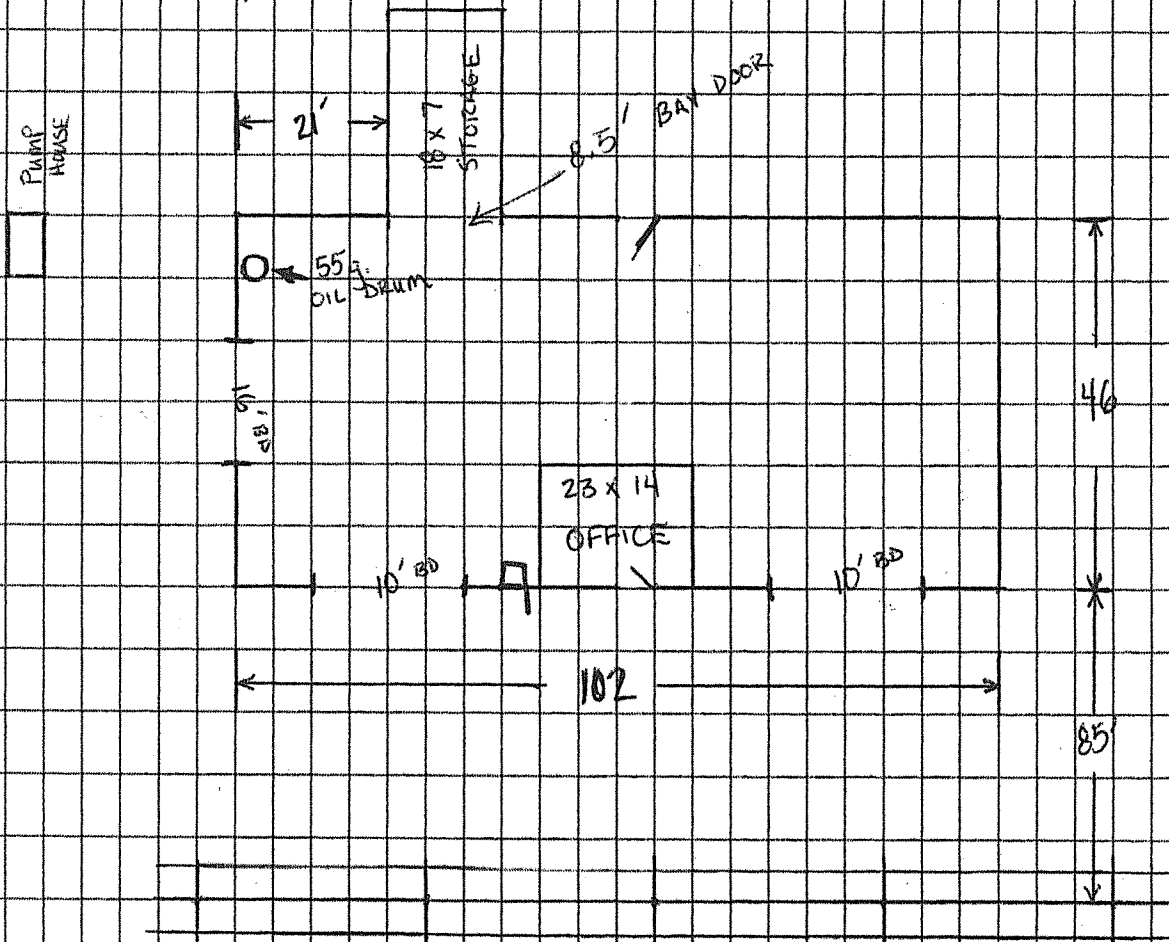
☐ If more room is required for notes, please use the back of this form.



Address: 4050 Wharton Station Rd.

Pre-Plan #:

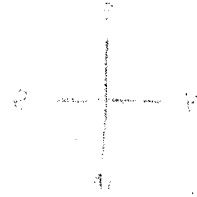
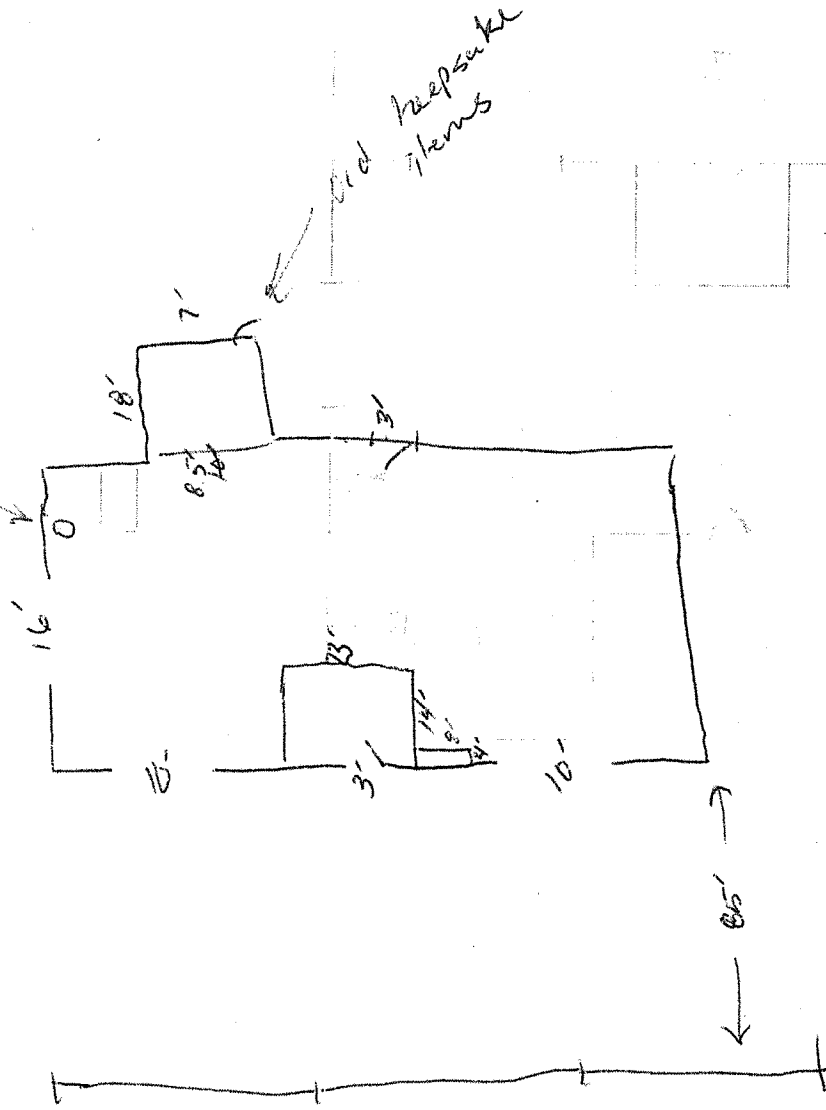
Name: Wharton Station Tire and Auto Care



102 x 46
 21ft
 18 x 7

Pump House


55 gal oil drum



Structure Name Wharton Station Tire + Auto.
 Structure Address 4050 Wharton Station Rd.

Length	Width	Sq Ft	Sq Root	X 18	X construction type	GPM sum 1	X Occupancy	GPM sum 2
102	46	4692	68.50	1232.97	1.5	1849.45	1.25	#####

Column F
Fire Resistive 0.6
Non-combustible 0.8
Ordinary 1
Wood Frame 1.5

Column H
.75 If Mostly non-combustible contents
.85 If Limited combustibles (apartments, churches, schools, hospitals)
1.0 If Mostly combustible (restaurants, sheds, garages)
1.15 If Free burning contents (post offices, horse stables, feed mills, repair garages, ag storage)
1.25 If Rapid burning (aircraft hangers, tires, flammable liquids, wood working)

Exposure % add	Exposure add GPM	Exposure per side (75% max) Total Side A	Exposure per side 75% max Side B	Exposure per side 75% max Side C	Exposure per side 75% max Side D	Total GPM with exposures
25%	577.95	0	0	0	0	2311.81
19%	439.24					
14%	323.65					
9%	208.08					
75%	1733.86	Total A, B, C, D				
MAX	0					

Column J, K, L and M
If up to 10 feet add 25% per side
If 11 to 30 feet add 19% per side
If 31 to 60 feet add 14% per side
If 61 to 100 feet add 9% per side

Round off to nearest 250 GPM for flows less than 2500 GPM, the nearest 500 GPM over 2500 GPM

Total GPM with exposures	Add 50% for each floor above ground floor	# of floors	Total to add for floors above	Sub-total with floors added	If wood shingles on roof add 500 GPM
2250.00	1125	0	0.00	2250.00	0
				2250.00	

FIRE FLOW NEEDED
GPM
2250.00